

**205.558 Prescreening and admissions review system.**

- (1) To prevent inappropriate placement and to contain costs related thereto, the secretary for health and family services shall implement a statewide prescreening and admissions review system, including the imposition of a resource means test, for all long-term-care facilities and beds, as defined under KRS Chapter 216, and any acute-care hospital-based skilled-nursing or intermediate-care beds participating under Title XIX of the Social Security Act, regardless of the payment status of the resident upon admission. Any person having resources sufficient to cover the cost of care for at least three hundred sixty-five (365) days following admission may be admitted to a long-term care bed or facility if such person so desires; provided, however, that if a person:
  - (a) Is admitted to a long-term-care facility or acute-care hospital-based skilled-nursing or intermediate-care bed without participating in the prescreening and admissions review system; or
  - (b) Participates in the prescreening and admissions review system and is not authorized for placement in a long-term-care facility or acute-care hospital-based skilled-nursing or intermediate-care bed;such person is not eligible for medical assistance payment for skilled-nursing or intermediate-care for one (1) year after the date of the person's admission to a skilled-nursing or intermediate-care facility or acute-care hospital-based skilled-nursing or intermediate-care bed unless the person subsequently participates in the prescreening and admissions review system and is authorized for admission to an intermediate-care or skilled-nursing facility or acute-care hospital-based skilled-nursing or intermediate-care bed.
- (2) To implement the provisions of this section the cabinet shall establish preadmission screening teams composed of a nurse, social worker, and physician.
- (3) Before preauthorization of any person for admission to an intermediate-care facility or skilled-care facility or acute-care hospital-based skilled-nursing or intermediate-care bed, the cabinet shall first make the following determinations:
  - (a) The health status and care needs of the person require immediate institutionalization in an intermediate-care facility or skilled-nursing facility or acute-care hospital-based skilled-nursing or intermediate-care bed;
  - (b) The person and his family have been fully advised of alternatives to institutional care and possible sources of reimbursement for such care;
  - (c) Alternatives to institutional care are not feasible; and
  - (d) Other such determinations as specified by administrative regulations promulgated by the cabinet under KRS Chapter 13A.
- (4) Admission of a person to an intermediate-care facility, or a skilled-nursing facility without first obtaining prior authorization from the Cabinet for Health and Family Services shall constitute a Class B violation.
- (5) The secretary for the cabinet shall promulgate such administrative regulations, subject to KRS Chapter 13A, as necessary to implement this section.

**Effective:** June 20, 2005

**History:** Amended 2005 Ky. Acts ch. 99, sec. 232, effective June 20, 2005. -- Amended 1998 Ky. Acts ch. 426, sec. 198, effective July 15, 1998. -- Created 1986 Ky. Acts ch. 466, sec. 3, effective July 15, 1986.